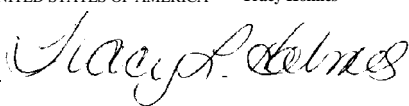


<b>ORDER FOR SUPPLIES OR SERVICES</b> (Contractor must submit four copies of invoice.)						Form Approved OMB No. 0704-0187 Expires Jun 30, 1997		PAGE 1 OF <b>5</b>					
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.													
<b>PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.</b> <b>SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.</b>													
1. CONTRACT/PURCH ORDER NO. <b>N00383-02-G-003H</b>			2. DELIVERY ORDER NO. <b>UBDR</b>		3. DATE OF ORDER (YYMMDD) <b>2004 JUL 09</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPE04155000020</b>		5. PRIORITY <b>DOA1</b>				
6. ISSUED BY <b>Defense Supply Center Columbus P.O. Box 3990 Columbus, OH 43218-3990 Local Administrator: PCCACBA (614)692-7500 / FAX: (614)692-6929 E-mail: Brian.Kennedy@dla.mil</b>			CODE <b>SP0900</b>		7. ADMINISTERED BY (If other than 6) <b>DCMA SANTA ANA ROOM 813A 34 CIVIC CENTER PLAZA SANTA ANA CA 92701-4056</b>			CODE <b>S0513A</b>		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR <b>PARKER HANNIFIN CUSTOMER SUPPORT IN 14300 ALTON PRKY IRVINNE CA 92618 Vendor's Copy was sent EDI. Do not Duplicate shipment.</b>			CODE <b>59211</b>		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>220 DAYS ADO</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED				
NAME AND ADDRESS							12. DISCOUNT TERMS <b>00.500% 15 days, NET 30 days</b>						
							13. MAIL INVOICES TO <b>See Block 15</b>						
14. SHIP TO <b>See Schedule - Do Not Ship to Address in Block 6</b>			CODE		15. PAYMENT WILL BE MADE BY <b>HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381 EFT: T</b>			CODE <b>HQ0339</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER			
16. TYPE OF ORDER			DELIVERY <input checked="" type="checkbox"/>		This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.								
			PURCHASE		Reference your <b>offer dated 2004 APR 08, M2004044618</b> and furnish the following on terms specified herein.								
					<b>ACCEPTANCE.</b> THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.								
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  <b>EG: 97X4930 5CE0 001 26.0 S33150</b>													
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*		21. UNIT		22. UNIT PRICE		23. AMOUNT	
		<b>Remarks: CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>				<b>TOTAL: 1</b>							
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.						24. UNITED STATES OF AMERICA <b>Tracy Holmes</b>		PCCPBX		25. TOTAL		<b>\$ 4157.58</b>	
						BY: 		TRACTING/ORDERING OFFICER		29. DIFFERENCE			
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED						30. INITIALS		31. PAID BY		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR	
DATE SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL						34. CHECK NUMBER	
36. I certify this account is correct and proper for payment.						<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL						35. BILL OF LADING NO.	
DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER													
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.			

## CONTINUATION SHEET

Order Number:

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Supplies and Packaging - Inspection and Acceptance Address:  
26055

PARKER HANNIFIN CORPORATION  
DIV ELECTRONIC SYSTEMS DIVISION  
300 MARCUS BOULEVARD  
SMITHTOWN NY 11787-2044

Admin Office for Supplies and Packaging:  
S3309A

S3309A CMDR DCMC LONG ISLAND

605 STEWART AVE  
GARDEN CITY LI NY 11530-4761

10 DAYS ADDED TO QUOTED DELIVERY IN LIEU OF AWARDDING ARO.

EARLY DELIVERIES ARE ACCEPTABLE.

ALL TERMS AND CONDITIONS OF BASIC ORDERING AGREEMENT N00383-02-0G-003H  
APPLY AND REMAIN IN EFFECT.

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## SECTION B

PR YPE04155000020  
NSN 5998-00-826-9332

## ITEM DESCRIPTION:

## ELECTRONIC COMPONENT

FOR PRINTED CIRCUIT BOARDS OR PRINTED WIRING BOARDS WHERE MIL-PRF-55110(FORMERLY MIL-P-55110) OR MIL-P-50884 IS CITED, IT IS RECOMMENDED THAT MIL-PRF-31032 BE UTILIZED. MIL-PRF-55110 IS PRESENTLY INACTIVE FOR NEW DESIGNS AND HAS BEEN REPLACED BY MIL-PRF-31032. MIL-P-50884 WILL BECOME INACTIVE FOR NEW DESIGNS AND REPLACED BY MIL-PRF-31032. SINCE THERE CURRENTLY IS NO EQUIVALENT DOCUMENT FOR THE CANCELLED MIL-S-13949 (FORMERLY MIL-P-13949), DSCC RECOMMENDS THAT THE CONTRACTOR HAVE A METHOD OF ASSURING THAT LAMINATE MATERIALS USED IN CONJUNCTION WITH DSCC CONTRACTS BE AT LEAST EQUIVALENT IN QUALITY AND RELIABILITY TO THAT WHICH WAS AVAILABLE PRIOR TO THE CANCELLATION OF MIL-S-13949 ON NOVEMBER 30, 1998.

NO DATA IS AVAILABLE. THE ALTERNATE OFFEROR IS REQUIRED TO PROVIDE A COMPLETE DATA PACKAGE INCLUDING DATA FOR THE APPROVED AND ALTERNATE PART FOR EVALUATION.

PARKER HANNIFIN CORP

(59211) P/N 576-170-001

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2001	YPE04155000020	0001	1	EA	<u>\$4157.58000</u>	<u>\$4157.58</u>

QTY VARIANCE: PLUS 0% MINUS 0%  
INSPECTION POINT: ORIGIN  
ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999  
QUP = 001: PRES MTHD = GX: CLNG/DRY = 1: PRESV MAT = 00:  
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:  
UNIT CONT = D3: OPI = M:  
INTRMDTE CONT = DO: INTRMDTE CONT QTY = AAA:

CONTINUED ON NEXT PAGE

SECTION B

PACK CODE = Q: PACKING LEVEL = B:  
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.  
SPECIAL MARKING CODE: 39 - MIL-STD-129 ESD SENS ELEC DEV RQMT APPLY

ALL REFERENCES TO MIL-STD-130 AND MIL-STD 129 SHALL MEAN REVISIONS "K" AND "N" RESPECTIVELY, NOTWITHSTANDING THE CITING OF OTHER SPECIFIC REVISION LETTERS OR TIME FRAMES.

DELIVER FOB: ORIGIN BY: 2005 FEB 14

PARCEL POST ADDRESS:

FMS REQ'T  
CONTACT TRANS OFFICE AT ADMIN OFF PRIOR TO SHIPMENT

M/F: (TCN) DTW45V41433566 XXX  
RDD A02 CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT  
PROJ TP 2  
SUP ADD DA4KDH SIG L

FOR GOVERNMENT USE ONLY: IPD 06

DIC A31 DIST N01 ADV 2L FC NL

\*\*\*\*\*

REMIT PAYMENT TO:

PARKER HANNIFIN CORP  
CUSTOMER SUPPORT OPERATIONS  
7969 COLLECTION CENTER DR  
CHICAGO IL 60693

\*\*\*\*\*

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<b>A04D01 52.204-9C06 DSCC Part 52 - SOLICITATION PROVISIONS AND CONTRACT CLAUSES STATEMENT (JUL 2004)</b>  Full text of all DLAD/DSCC clauses listed within this individual solicitation are contained in the DSCC Part 52 - Solicitation Provisions and Contract Clauses, current version found at <a href="http://dibbs.dscclia.mil/refs/provclauses">http://dibbs.dscclia.mil/refs/provclauses</a> . Also, the full text of FAR/DFARS clauses incorporated by reference may be accessed electronically at <a href="http://www.dla.mil/j-3/j-336/icps.htm">http://www.dla.mil/j-3/j-336/icps.htm</a> The clauses/provisions incorporated by reference have the same force and effect as if they were in full text; however, those having no bearing on the instant acquisition become self-deleting. In the event of an inconsistency between text found in DSCC Part 52 and the individual solicitation/award, the provision of the individual solicitation/award shall govern.	( ) (Vendor Fill-in) Other (CAGE, Name, Street Address, City, State and Zip Code)  _____ (Vendor Fill-in) _____ (Vendor Fill-in) _____ (Vendor Fill-in)  Applicable to CLIN(s): _____ ALL (Vendor Fill-in)	
<b>A04D02 52.204-9C07 PAYMENT BY ELECTRONIC FUNDS TRANSFER (EFT) - CENTRAL CONTRACTOR REGISTRATION (CCR) DSCC:</b>  Unless otherwise stated in the remarks section of this contract/order, the payment information contained in the CCR has precedence over any other payment information that may be printed in the Remittance Address field of this contract/order.	<b>E46D02 52.246-9C02 ACCEPTANCE AT ORIGIN (NOV 1995) DSCC</b>  <b>E46D03 52.246-9C03 SECONDARY ADMINISTRATION (JUN 2001) DSCC</b>  INSPECTION/ACCEPTANCE AT ORIGIN WILL BE PERFORMED BY: SUPPLIES ( ) Office Administering Order/Contract Applicable to CLIN(s): _____  (X) Other S3309A  Applicable to CLIN(s): ALL	
<b>SECTION B</b>  Basic Ordering Agreement or Contract Effective Dates 01/16/03 through 01/15/06 .  ( ) Price List No. _____ dated **/**/** . (X) Quote/Ref. No. M2004044618 dated 04/08/04 . (x) FOB Origin - Clin(s) all  (X) FOB Origin Shipping Point: SMITHTOWN, NY ( ) FOB Destination - Clin(s) ( ) PAS Serial No. ( ) NIB/NISH Allocation No.  (X) Firm Fixed Price ( ) Firm Fixed Price w/EPA	PACKAGING ( ) Office Administering Order/Contract Applicable to CLIN(s): _____  (X) Same as for Supplies ( ) Other  Applicable to CLIN(s):	
<b>SECTION E</b>  <b>E46A17 52.246-15 CERTIFICATE OF CONFORMANCE (APR 1984) FAR</b>  <b>E46B01 252.246-7000 MATERIAL INSPECTION AND RECEIVING REPORT (MAR 2003) DFARS</b>  <b>E46D01 52.246-9C01 INSPECTION AT ORIGIN (JUN 2001) DSCC</b>  (c) Inspection Points:  SUPPLIES ( ) (Vendor Fill-in) Same as Offeror Applicable to CLIN(s): _____ <div style="text-align: right;">(Vendor Fill-in)</div>  (X) (Vendor Fill-in) Other (CAGE, Name, Street Address, City, State and Zip Code) _____ PARKER HANNIFIN (260550) (Vendor Fill-in) 300 MARCUS BLVD (Vendor Fill-in) SMITHTOWN, NY 11787-2044 (Vendor Fill-in)  Applicable to CLIN(s): _____ ALL (Vendor Fill-in)  PACKAGING ( ) (Vendor Fill-in) Same as Offeror Applicable to CLIN(s): _____ <div style="text-align: right;">(Vendor Fill-in)</div>  (X) (Vendor Fill-in) Same as above	<b>SECTION F</b>  <b>F25C01 52.225-9002 FMS SHIPPING INSTRUCTIONS (JUN 1998) DLAD</b>  <b>F47A01 52.247-29 F.O.B ORIGIN (JUN 1988) FAR</b>  <b>SECTION I</b>  <b>I04B04 252.204-7004 ALTERNATE A (NOV 2003) DFARS</b>  <b>I32B02 252.232-7003 ELECTRONIC SUBMISSION OF PAYMENT REQUESTS (JAN 2004) DFARS</b>  <b>I39C01 52.239-9000 Y2K COMPLIANCE NOTICE (JUN 2002) DLAD</b>	